



THE CITY OF SAN DIEGO
REPORT TO THE CITY COUNCIL

DATE ISSUED: July 8, 2009 REPORT NO. 09-104
ATTENTION: Rules Committee Agenda of July 15, 2009
SUBJECT: San Diego Police Department Homeless Outreach Team

SUMMARY

THIS IS AN INFORMATION ITEM ONLY. NO ACTION IS REQUIRED ON THE PART OF THE COMMITTEE OR THE CITY COUNCIL.

BACKGROUND

The San Diego Police Department Homeless Outreach Team (HOT) originated in 1999, as a problem solving effort to assist patrol officers with community disorder created by chronic homelessness.

In 1999, the City of San Diego Emergency Medical Director Dr. Jim Dunford published a report documenting 15 of San Diego's chronic alcoholics costing the City and County about 1.5 million dollars in unreimbursed medical care.

In 2000, the Serial Inebriate Program (SIP) began as a pilot program to assist the Police Department with the criminal prosecution of chronic inebriates.

In 2003, the United States Interagency on Homelessness and HUD selected 10 programs in the United States as "best practices" for successfully diverting chronic homeless individuals off the street and into available housing or treatment programs. SIP and HOT were 2 of the 10.

DISCUSSION

The San Diego Regional Task Force for the Homeless is responsible for conducting yearly "Point in Time" counts of the regions homeless. The Task Force's 2008 report estimates the San Diego Region has about 7,582 homeless. The City of San Diego accounts for about 50% of these homeless or about 4,082 individuals.

The region's homeless are categorized into two subgroups called chronic homelessness and situational homelessness. The task force estimates about 25% of the regions homeless are considered chronically homeless. The vast majority of the chronically homeless live in the City of San Diego's Downtown, Hillcrest, Midway/Rosecrans, North Park, Beach Areas, and La Jolla.

Chronic homelessness is defined by the federal government as:

- About 10% of Homeless Population-Most Visible Form.
- Long Term or Repeated Homelessness for more than one year.
- Individuals disabled with:
 - Serious mental illness
 - Substance abuse, or
 - Chronic physical illness
- Frequent histories of hospitalization, unstable employment, and incarceration.
- Usually men/Avg. age 40's.
- Experienced by about 150,000 Americans each year.
- Found in countries, cities, suburbs and rural areas across the United States.

The Homeless Outreach Team works primarily with individuals suffering from chronic homelessness. It is a multi-disciplinary team with partnerships between law enforcement, City of San Diego Emergency Medical Services, the Superior Courts, County Alcohol and Drug Services, County Mental Health Services, County Health and Human Services Agency, local homeless service providers, area hospitals, and numerous community agencies.

The Team consists of 4 San Diego Police Officers, 2 Psychiatric Emergency Response Team Clinicians (PERT), 2 County of San Diego Health and Human Service Specialists, and 1 San Diego Fire Department firefighter/paramedic. It is currently funded by the City of San Diego (\$50,000 CDBG Grant), the Police Department (\$99,000), and private donations from the San Diego Police Foundation. This money funds the teams 2 PERT Clinicians.

The County of San Diego supports the team with "in-kind" services of the 2 HHSA Specialists. The HHSA and PERT partnerships provides the team with the ability to make facilitated placements into many county funded mental health and substance abuse treatment programs.

One San Diego Police Department Sergeant supervises the team's day-to-day activity. The Homeless Outreach Team is comprised of four components. Outreach teams, the Serial Inebriate Program, an enforcement element, and an emergency medical services liaison called the Resource Access Program (RAP).

OUTREACH TEAM

There are two outreach teams on the streets Monday-Friday from 5:30AM to 3:30PM. A team consists of one police officer, one PERT clinician, and one HHSA Specialist. These teams do limited enforcement as their primary function is to develop relationships with the homeless and provide voluntary outreach to the chronic homeless population. They take referrals from other San Diego Police Officers, community members, City Council, and the Superior Courts. Staffing permitted there is at least one Outreach Team at the City Concourse Public Bathrooms Monday-Friday from 6:30AM-8AM.

These two teams contact about 1000 people per year and average about 300 placements per year. Placements are usually with County funded mental health or alcohol and drug providers.

ILLEGAL LODGING

In 2006 a law suit was filed in Federal Court

- 6 defendants alleged it was unconstitutional to arrest for illegal lodging when there are no beds available.

In February 2007 there was a case settlement

- Settlement does not apply to private property
- Public property only
- Generally no enforcement between hours 9PM-5:30AM
- Department needs complaint to enforce law
- Prior to any arrest suspect must receive warning and given a chance to relocate.

As a result of this settlement illegal lodging arrests have dropped from about 2000 arrests in calendar year 2006 to about 500 for the calendar year 2008. The vast majority of all illegal lodging arrests are in the Downtown/East Village area.

All illegal lodging arrests are processed by the San Diego City Attorney Neighborhood Prosecution Unit. (NPU)

- NPU makes sure cases adhere to 2007 court settlement.
- If suspect is convicted the Homeless Outreach Team is notified to schedule an in custody interview.
- Suspect is assessed by HOT for facilitated placement
- Suspect may be released from jail to HOT personnel for such placement.

SERIAL INEBRIATE PROGRAM

The Serial Inebriate Program is a post sentencing program using alternative sentencing for the charge of drunk in public in an effort to divert the clients into county funded treatment. The concept is similar to the Drug Court Model.

The goals of the Serial Inebriate Program are to stop or slow the “revolving door” of chronic inebriates going in and out of jail, the sobering center, and area hospitals because of alcohol intoxication. The program provides county funded treatment in lieu of any court imposed custody time.

The Sobering Center, operated by the Volunteers of America, identifies all program participants. Individuals transported to the Sobering Center by the San Diego Police Department five or more times in a thirty day period will be rejected from the facility as a chronic offender. The arresting police officer will then book the individual into County Jail under arrest for drunk in public.

Once in jail, the City Attorney's Neighborhood Prosecution Unit prosecutes the case. If convicted and sentenced to any custody time the individual will be offered treatment in lieu of custody.

The SIP consists of 1 San Diego Police Officer managing the program's day-to-day operations. This officer makes sure all arrest documentation is complete and liaisons with the Superior Courts.

SIP funding is a collaborative effort between the City and County of San Diego.

The City of San Diego Housing Commission funds:

- \$80,000 per year
- Funds sober living housing

The County of San Diego Alcohol and Drug Services funds:

- \$120,000 per year
- Funds treatment

SIP accounts for about 300 people being arrested for drunk in public each year.

Mental Health Systems Inc. is County/City funded provider and provides

- Case management
- Jail assessments
- Sober Living Beds
- Treatment

St. Vincent de Paul Medical Center is program medical case manager and provides a medical home for all SIP participants.

ENFORCEMENT

The HOT often received calls from City departments asking for help with homeless issues. Because of this the team has assigned one police officer to liaison with the City of San Diego Code Enforcement Unit, Parks and Recreation, Open Space, Cal Trans, and the Neighborhood Prosecution Unit Code Enforcement Section.

RESOURCE ACCESS PROGRAM (RAP)

In April 2008, the San Diego Fire Department launched a pilot program called the Resource Access Program. It has been developed by City of San Diego Medical Director Dr. James Dunford out of a need to help reduce the impact of high end users on the City's Emergency Medical Services.

Dr. Dunford's research revealed in the calendar year 2006, 933 patients were transported five or more times. In total these patients accounted for 7,652 transports, an average of more than 8 transports per patient and accounted for approximately 11% of all City transports.

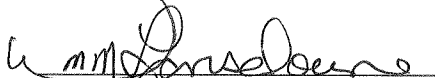
The gross charges for these transports were \$6.4 million dollars, of which less than 28% were collected revenue. This means that more than \$4.6 million dollars were either adjusted due to Medicare/Medical (underinsured) or written off as bad debt (uninsured).

Many of the patients identified by Dr. Dunford are chronically homeless. Because of this the one firefighter/paramedic assigned to RAP works closely with the HOT two days (20 hours) a week. Working closely with the HOT, this firefighter/paramedic is able to immediately access resources available to the team.

CONCLUSION

The Homeless Outreach Team has been recognized throughout the United States as an excellent program. The partnerships created between the County, City, and community has enabled police officers on the street to effectively work with the underserved chronic homeless population.

Respectfully submitted,



William M. Lansdowne
Chief of Police